

NIH CLINICAL CENTER NURSING & PATIENT CARE SERVICES

CRN POC COMPETENCY VALIDATION

Name: _____ Manager or Designee: _____
 Work Area: _____ Primary Preceptor: _____
 Hire Date: _____ Competency Date: Met _____ Not Met: _____

Reason for validation: ☐ Orientation ☐ Re-validation ☐ PI Follow-up ☐ Other _____

Key: 1 = No knowledge/No experience
 2 = Knowledge/No experience

3 = Knowledge/Done with assistance
 4 = Knowledge/Done independently

Circle method used for validation: D = Demonstration DR = Documentation Review V = Verbalization
 T = Test/Quiz O = Other (specify)

Competency: Pediatric Mechanical Ventilation – Manages care and seeks to prevent complication in pediatric patients requiring mechanical ventilation.

Behavioral Indicators	Self Evaluation				Assessment Method	Validator's Signature/Date		Learning Resource	Comments
						Met	Not Met*		
1. Identifies indications for intubation.	1	2	3	4				AACN Procedure Manual Experience with Respiratory Therapy Kids Concepts III: Pediatric Critical Care Nursing Experience with preceptor	
2. Defines different modes: Control modes a. Volume control b. Pressure control c. Pressure-regulated ▪ volume control Support modes a. Volume support b. SIMV c. Pressure support d. CPAP	1	2	3	4					
3. Able to gather appropriate equipment for intubation: a. Connects O ₂ b. Bag Value Mask c. Correct size ET tube with stylet d. Tape/fixation devices e. Stethoscope f. 10cc syringe g. Medications according to the Pediatric Rapid Sequence Intubation Drug Sheet.	1	2	3	4					
4. Assists with intubation as necessary.	1	2	3	4					

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Behavioral Indicators	Self Evaluation				Assessment Method	Validator's Signature/Date		Learning Resource	Comments
						Met	Not Met*		
5. Demonstrates ability to verify and record placement of ETT using the pediatric E.Z. cap.	1	2	3	4					
6. Demonstrates ability to suction ventilated patient: a. In-line b. Aseptic technique	1	2	3	4					
7. Correctly verifies ventilator settings	1	2	3	4					
8. Correctly interprets ABG results.	1	2	3	4					
9. Monitors patient trends for risk of complications (e.g., PIP, sputum).	1	2	3	4					
10. Identifies indications for extubation.	1	2	3	4					

Action Plan for Competency Achievement
Targeted Areas for Improvement (Behavioral Indicators):

Educational Activities/Resources Provided:

“Hands on” practice planned with preceptor, unit educator, CNS, nurse manager:

Re-evaluation date: _____

By: _____

- ☐ Competency Met
- ☐ Competency Not Met

Next Step:_____